



Date Received _____ Operator No. _____ Cashier No. _____

Resource Indemnity Trust Tax

For Year Ending December 31, 20__

Coal Producers

Title 15, Chapter 38, Part 1, MCA

Name _____	Name of Mine _____
Address _____	County _____
_____	Section _____ Township _____ Range _____
Telephone _____	School District _____

Quantity

Gross Revenue

\$ _____

Deductions

Black Lung Tax	\$ _____
Federal Reclamation Tax	\$ _____
Resource Indemnity Trust Tax	\$ _____
Coal Severance Tax	\$ _____
Coal Gross Proceeds Tax	\$ _____
Royalty Deduction	\$ _____
Total Deductions	\$ _____

1. Contract Sales Price (gross revenue minus total deductions)	\$ _____
2. Tax Rate (.4%)	_____ .004
3. Tax (Minimum tax = \$25) line 1 times line 2	\$ _____
4. Late Pay Penalty (1½% per month)	\$ _____
5. Interest (1% per month on tax and penalty)	\$ _____
6. Total Amount Due (Add lines 3 thru 5)	\$ _____

Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief the information contained herein is true, correct, complete and in compliance with applicable Montana statutes and regulations.

Signature of Principal Officer or Agent

Date

Date due: On or before March 1st

Mail to: Montana Department of Revenue, P.O. Box 5805, Helena, MT 59604-5805